## PART B - FEE(S) TRANSMITTAL

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MXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				Dept. front Road		I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
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				7 ( 0 100 )		Tacquelin		1. Leur	(Signature)	
			ctober 29. 2007			(Date)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVI		ITOR	R ATTO		ENEY DOCKET NO.	CONFIRMATION NO.	
10/828,755	04/21/2004			Charles A. Mille	ar .	,		P208-US	5339	
TITLE OF INVENTION: INTELLIGENT PROBE CARD ARCHITECTURE										
APPLN. TYPE	SMALL ENTITY		SUE FEE DUE	PUBLICATION FEB DUE		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1400	\$300		\$0		\$1700	10/31/2007	
EXAMINER		ART UNIT		CLASS-SUBCLASS		]				
PATEL, PARESH H			2829							
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of or include 5 (Aurino page 1) 1 N. Kenneth Burraston						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AN	D RESIDENCE DATA	A TO B	E PRINTED ON T	THE PATENT (print of	or typ	ne)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE				(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
FormFactor, Inc. Livermore, CA										
Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🔯 Corporation or other private group entity 🚨 Government										
4a. The following fee(s) at	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)									
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5. Change in Entity State  a. Applicant claims				b. Applicant is no	o long	zer claiming SMAI	LL ENT	ITY status. See 37 CF.	R 1.27(g)(2).	
NOTE: The Issue Fee and interest as shown by the re										
Authorized Signature						Date	Oc	tober 29, 200	7	
Typed or printed name Robert Scott Hauser						Registration N	o. 3	7,847		
This collection of informs an application. Confidenti submitting the completed this form and/or suggestio Box 1450, Alexandria, Vir Alexandria, Virginia 2231 Under the Paperwork Reduction of the Paperwork Reduction.	J 1 1801 .					ctain a benefit by t imated to take 12 r idual case. Any co r, U.S. Patent and THIS ADDRESS	he publi- minutes mments Trademi SEND	c which is to file (and to complete, including on the amount of tim ark Office, U.S. Depar TO: Commissioner fo		